

**U.S. Department of Justice
United States Marshals Service**

PROCESS RECEIPT AND RETURN

PLAINTIFF
UNITED STATES OF AMERICA

COURT CASE NUMBER
**FH
05CR-10138-DPW**

DEFENDANT
Carmen Lopera, et. al.,

TYPE OF PROCESS **Preliminary Order of Forfeiture**

SERVE
→
AT

NAME OF INDIVIDUAL, COMPANY, CORPORATION, ETC. TO SERVE OR DESCRIPTION OF PROPERTY TO SEIZE OR CONDEMN

Carmen Lopera

ADDRESS (Street or RFD, Apartment No., City, State, and ZIP Code)

49 John Street, Apt. # 6 Malden, MA 02148

DISTRICT OF MASS.

SEND NOTICE OF SERVICE TO REQUESTER AT NAME AND ADDRESS BELOW:

Number of process to be served with this Form USM 285

Jennifer H. Zacks, Assistant U.S. Attorney
United States Attorney's Office
John Joseph Moakley United States Courthouse
1 Courthouse Way, Suite 9200
Boston, MA 02210

Number of parties to be served in this case

Check for service on U.S.A.

SPECIAL INSTRUCTIONS OR OTHER INFORMATION THAT WILL ASSIST IN EXPEDITING SERVICE (Include Business and Alternate Address, All Telephone Numbers, and Estimated Times Available For Service)

Please serve the attached Preliminary Order of Forfeiture upon the above name individual by certified mail return receipt requested.

NES ext. 3280

Signature of Attorney or other Originator requesting service on behalf of :	<input checked="" type="checkbox"/> PLAINTIFF <input type="checkbox"/> DEFENDANT	TELEPHONE NUMBER (617) 748-3100	DATE 9/20/05
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SPACE BELOW FOR USE OF U.S. MARSHAL ONLY - DO NOT WRITE BELOW THIS LINE

I acknowledge receipt for the total number of process indicated. (Sign only first USM 285 if more than one USM 285 is submitted)	Total Process No. _____	District of Origin No. <u>38</u>	District to Serve No. <u>38</u>	Signature of Authorized USMS Deputy or Clerk <i>Wiley J Wiley</i>	Date <u>9/20/05</u>
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I hereby certify and return that I have personally served, have legal evidence of service, have executed as shown in "Remarks", the process described on the individual, company, corporation, etc. at the address shown above or on the individual, company, corporation, etc., shown at the address inserted below.

I hereby certify and return that I am unable to locate the individual, company, corporation, etc., named above (See remarks below).

Name and title of individual served (If not shown above).	<input type="checkbox"/> A person of suitable age and discretion then residing in the defendant's usual place of abode.
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Address (complete only if different than shown above)	Date of Service <u>10/13/05</u>	Time am pm
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Service Fee	Total Mileage Charges (including endeavors)	Forwarding Fee	Total Charges	Advance Deposits	Amount Owed to US Marshal or Amount or Refund
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REMARKS: 9/30/05 certified mail 7004 1160 0001 5657 8573

Returned Undeliverable

(4)